As below named inventor, I hereby declare that:  My residence, post office address and eitzineship are as stated below next to my name,  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names as below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  A METHOD AND SYSTEM FOR MANAGING IMAGES OVER A COMMUNICATION NETWORK  The specification of which (check only one item below):  X is attached hereto.  was filed as United States Application Serial No. on and was amended under PCT Article 19 on (if applicable).  was filed as PCT international application Number on and was amended under PCT Article 19 on (if applicable).  I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any ame referred to above.  I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined 37, Code of Federal Regulations, § 15.6.  I hereby state that a papilication of the patent of the pate		Combined Declaration	n For Paten	t Applicatio	n and	Power of Attorr	iey		ATT0		OCKET
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POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

s	end Corresp	ondence to:		Direct Telephone Calls to:
		Patent Legal	(name and telephone number)	
		Eastman Ko 343 State St Rochester, N	Frank Pincelli (716) 588-2728 FAX: (716) 477-4646	
2	FULL NAME OF INVENTOR	FAMILY NAME McIntyre	FIRST GIVEN NAME Dale	SECOND GIVEN NAME
0	RESIDENCE & OTIZENSHIP	Honeoye Falls	New York 14472	COUNTRY OF CITIZENSHIP USA
1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2	FULL NAME OF INVENTOR	FAMILY NAME Fredlund	FIRST GIVEN NAME John	SECOND GIVEN NAME R.
0	RESIDENCE & CITIZENSHIP	CITY Rochester	New York 14626	COUNTRY OF CITIZENSHIP USA
2	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company	343 State Street, Rochester	STATE & ZIP CODE (COUNTRY) New York 14650 USA
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
ů 0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
3	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
ji 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
4	BUSINUSS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
5	BUSINESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
A 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FÖREIGN COUNTRY	COUNTRY OF CITIZENSHIP
6	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and helief are believed to be true; and further that these statements were made with the knowledge that wilfulf false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such wilful false statements may penatric straing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203					
11.0. 4111		ł					
Wall of Michigan	Kom E- I red lund	<b>!</b>					
DATE	DAZE	DATE					
6-22-011	22-JUN-01						
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206					
DATE	DATE						
BATE	DATE	DATE					

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